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Florida Department of State  
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To: Division of Corporations  
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Email Address: jmiranda@foxrothschild.com

Foreign Limited Liability Company  
Alta 9600 Phase I LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8/17

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Alta 9600 Phase I LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. Delaware 86-3528319
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, FS to determine penalty liability)

5. 2950 SW 27 Avenue 2950 SW 27 Avenue
(Street Address of Principal Office) (Mailing Address)

Suite 220 Suite 220

Miami, Florida 33133 Miami, Florida 33133

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporate Creations Network, Inc.
Office Address: 801 US Highway One
North Palm Beach, Florida 33408
(City) (zip code)

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Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:  Manager Name: Felipe Raimundo Onetto
Address: 2950 SW 27 Avenue Suite 220 Miami, Florida 33133
 Authorized Person
 Other \_\_\_\_\_  Other \_\_\_\_\_

Title or Capacity:  Manager Name: Juan Ignacio Montes Labarca
Address: 2950 SW 27 Avenue Suite 220 Miami, Florida 33133
 Authorized Person
 Other \_\_\_\_\_  Other \_\_\_\_\_

Manager Name: \_\_\_\_\_
 Member Address: \_\_\_\_\_
 Authorized \_\_\_\_\_
Person \_\_\_\_\_
 Other \_\_\_\_\_  Other \_\_\_\_\_

Manager Name: \_\_\_\_\_
 Member Address: \_\_\_\_\_
 Authorized \_\_\_\_\_
Person \_\_\_\_\_
 Other \_\_\_\_\_  Other \_\_\_\_\_

Manager Name: \_\_\_\_\_
 Member Address: \_\_\_\_\_
 Authorized \_\_\_\_\_
Person \_\_\_\_\_
 Other \_\_\_\_\_  Other \_\_\_\_\_

Manager Name: \_\_\_\_\_
 Member Address: \_\_\_\_\_
 Authorized \_\_\_\_\_
Person \_\_\_\_\_
 Other \_\_\_\_\_  Other \_\_\_\_\_

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

[Handwritten Signature]

Signature of an authorized person

# Delaware

The First State

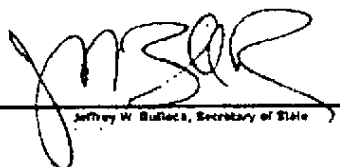
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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ALTA 9600 PHASE I LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF OCTOBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALTA 9600 PHASE I LLC" WAS FORMED ON THE THIRD DAY OF JUNE, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



  
Jeffrey W. Bullock, Secretary of State